Health Canada

2010-2011 Estimates

Part III – Report on Plans and Priorities

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Minister's Message

I am pleased to present Parliament with Health Canada's 2010-2011 Report on Plans and Priorities. This Report outlines the Department's proposed priorities for the next three years.

Health Canada's mandate is to help Canadians maintain and improve their health. As such, our focus is targeted at First Nations and Inuit health, consumer and environmental safety, and working with provincial and territorial partners to support health system innovation. Investments under Canada's Economic Action Plan will play a key role in our progress towards that end.

Health Canada is committed to helping make this country's population among the healthiest in the world. But this will only be reached when all Canadians share more equally in positive health outcomes. To that end, we will continue to work with provincial and First Nations partners towards integrating these health systems. Through better integration, communities will be more empowered, systems will be strengthened, and health outcomes will be improved. New and renovated health infrastructure, support for primary care services, and strengthening of our Non-Insured Health Benefits program, represent investments in stronger, healthier First Nations and Inuit communities.

We have made great strides in recent years in health protection, including modernizing Canada's regulatory system for food, drugs and consumer products. But more can be done. As we move ahead, Health Canada will continue to implement the recommendations of the independent investigator on listeriosis. We will also undertake work to make natural health products more available, while balancing the regulatory burden and accessibility to products. Building on the significant progress made in the areas of health promotion and disease prevention, we will continue efforts to curb youth smoking rates by further regulating marketing and flavouring in tobacco products. We will also minimize the risks to Canadians from environmental hazards through continued implementation of the Chemicals Management Plan.

Our Government has identified priorities with respect to health system innovation. Health practitioners are the cornerstone of an accessible and equitable health system. While Canada's health system remains the envy of many countries, some Canadians still experience difficulty gaining access to physicians, nurses and other health care providers. As a result, the Department will continue to collaborate with provincial and territorial partners on measures to better meet Canada's needs in health human resources.

Our Government will continue to enhance its readiness to deal with health emergencies such as the H1N1 flu pandemic and the National Research Universal reactor shutdown. Both situations have had important implications for the health of Canadians. They have also presented Health Canada with opportunities to learn, improve policies and programs, and better prepare for the future. With respect to H1N1, Health Canada will work with the Public Health Agency of Canada to assess our response to the H1N1 outbreak to further strengthen Canada's broader emergency preparedness. Health Canada will continue to work with First Nations communities to help them prepare and deal with future outbreaks in their communities. As well, Health Canada will continue to support the ongoing efforts of the medical community and the provinces and territories to minimize the impact of disruptions in the supply of medical isotopes. Health Canada will review other sources and alternatives to isotopes to ensure they are safe and effective for Canadians.

I am confident the plans and priorities described in this Report will help make Canada healthier, and I look forward to working with Canadians across the country in moving forward with this plan.

Leona Aglukkaq, P.C., M.P.
Minister of Health

Section I – Departmental Overview

Raison d'être

Health Canada's mandate is to help Canadians maintain and improve their health. The Department is committed to improving the lives of all Canadians and to making this country's population among the healthiest in the world as measured by longevity, lifestyle and effective use of the public health care system.

Responsibilities

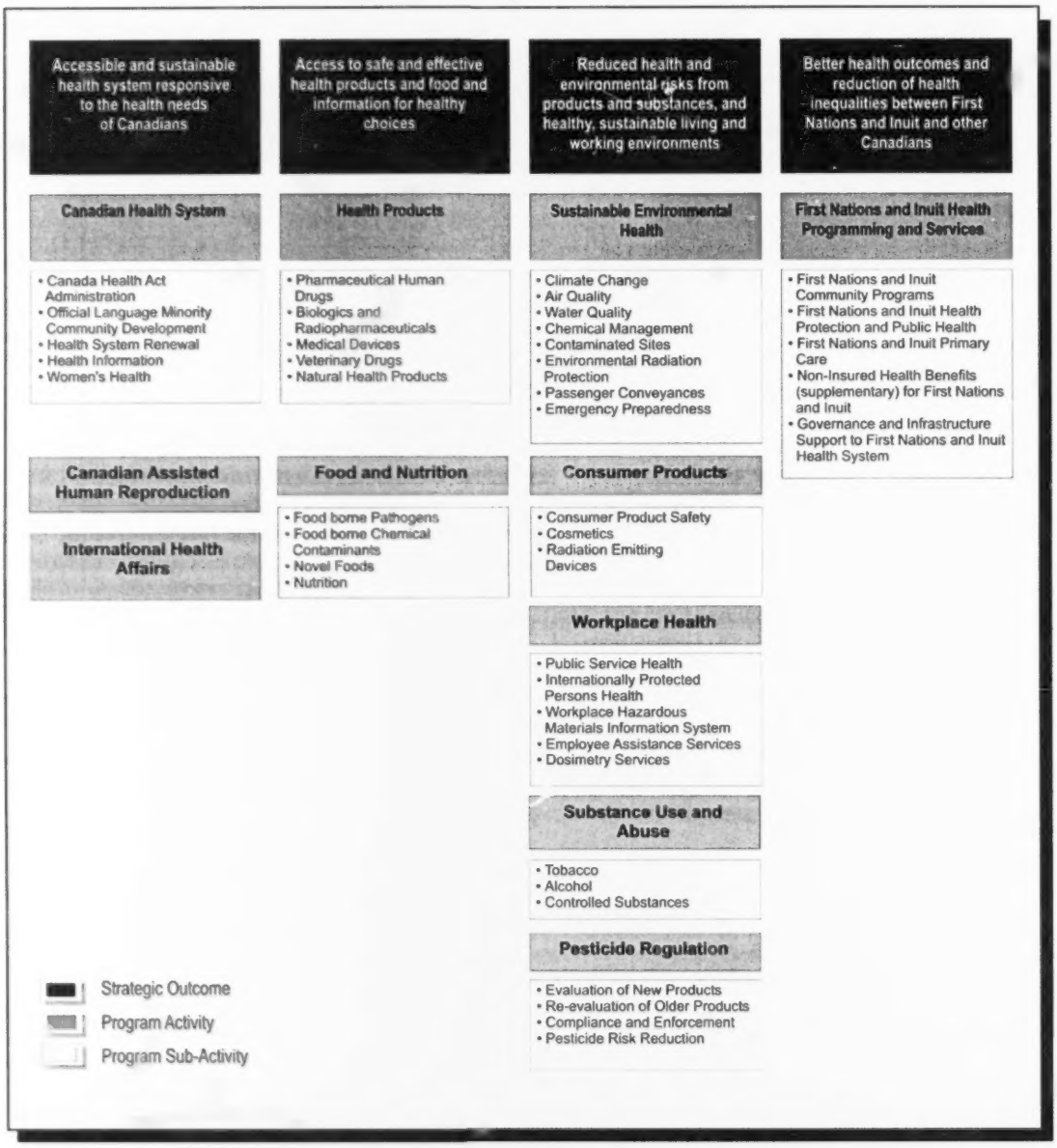
Health Canada has many roles and responsibilities that help Canadians maintain and improve their health. First, as a **regulator**, Health Canada is responsible for the regulatory regimes governing the safety of products including food, pharmaceuticals, medical devices, natural health products, consumer products, chemicals, radiation emitting devices, cosmetics and pesticides. It also regulates tobacco products and controlled substances, public health on aircraft, ships and other passenger conveyances, and helps manage the health risks posed by environmental factors such as air, water, radiation and contaminants.

The Department is also a **service provider**. The federal government has provided basic health services to First Nations since 1904. Today, Health Canada provides basic primary care services in approximately 200 remote First Nations communities, home and community care in 600 First Nations communities, support for health promotion programs in Inuit communities across four regions and a limited range of medically-necessary health-related goods and services not insured by private or other public health insurance plans to eligible First Nations and Inuit. The Department also funds or delivers community-based health programs and public health activities to First Nations and Inuit. These activities promote health, prevent chronic disease and address issues such as substance abuse and the spread of infectious diseases.

Health Canada is a **catalyst for innovation**, a **funder**, and an **information provider** in Canada's health system. It works closely with provincial and territorial governments to develop national approaches on health system issues and promotes the pan-Canadian adoption of best practices. It administers the *Canada Health Act*, which embodies national principles to ensure a universal and equitable publicly-funded health care system. It provides policy support for the federal government's Canada Health Transfer to provinces and territories, and provides funding through grants and contributions to various organizations to help meet Health Canada's objectives. Lastly, the Department draws on leading-edge science and policy research to generate and share knowledge and information to support decision-making by Canadians, development and implementation of regulations and standards, and health innovation.

Strategic Outcomes and Program Activity Architecture

In order to pursue its mandate most effectively and allocate resources appropriately, Health Canada has identified four strategic outcomes, each of which is supported by a framework of program activities and sub-activities.


Accessible and sustainable health system responsive to the health needs of Canadians
Access to safe and effective health products and food and information for healthy choices
Reduced health and environmental risks from products and substances, and healthy, sustainable living and working environments
Better health outcomes and reduction of health inequalities between First Nations and Inuit and other Canadians
Canadian Health System
• Canada Health Act Administration
• Official Language Minority Community Development
• Health System Renewal
• Health Information
• Women's Health
Health Products
• Pharmaceutical Human Drugs
• Biologics and Radiopharmaceuticals
• Medical Devices
• Veterinary Drugs
• Natural Health Products
Sustainable Environmental Health
• Climate Change
• Air Quality
• Water Quality
• Chemical Management
• Contaminated Sites
• Environmental Radiation Protection
• Passenger Conveyances
• Emergency Preparedness
First Nations and Inuit Health Programming and Services
• First Nations and Inuit Community Programs
• First Nations and Inuit Health Protection and Public Health
• First Nations and Inuit Primary Care
• Non-Insured Health Benefits (supplementary) for First Nations and Inuit
• Governance and Infrastructure Support to First Nations and Inuit Health System
Canadian Assisted Human Reproduction
International Health Affairs
Food and Nutrition
• Food borne Pathogens
• Food borne Chemical Contaminants
• Novel Foods
• Nutrition
Consumer Products
• Consumer Product Safety
• Cosmetics
• Radiation Emitting Devices
Workplace Health
• Public Service Health
• Internationally Protected Persons Health
• Workplace Hazardous Materials Information System
• Employee Assistance Services
• Dosimetry Services
Substance Use and Abuse
• Tobacco
• Alcohol
• Controlled Substances
Pesticide Regulation
• Evaluation of New Products
• Re-evaluation of Older Products
• Compliance and Enforcement
• Pesticide Risk Reduction
Strategic Outcome
Program Activity
Program Sub-Activity

Planning Summary

Financial Resources

The financial resources table provides a summary of the total planned spending for Health Canada for the next three fiscal years:

Financial Resources	2010-11	2011-12	2012-13
($ millions)	3,448.5	3,099.2	3,123.7

The decrease in planned spending from fiscal year 2010-11 to 2011-12 is due to a number of factors: the end of the Canada's Economic Action Plan funding, discussed later in this report; the sunsetting of funding for certain programs; and, implementation of decisions identified in 2009 Strategic Review decisions.

Human Resources

The human resources table provides a summary of the total planned human resources for Health Canada for the next three fiscal years:

Human Resources	2010-11	2011-12	2012-13
Full-Time Equivalents (FTEs)	9,745	9,380	9,354

Planning Summary Tables

Strategic Outcome 1: Accessible and Sustainable Health System Responsive to the Health Needs of Canadians

Performance Indicators	Targets
Percentage of Canadians reporting timely access	Increased number of Canadians reporting timely access (baseline is 80% of Canadians reporting timely access taken from the Health Services Access Study, published in 2006)
Percentage of Canadians satisfied with quality of primary, acute, chronic and continuing health care service	Increased number of Canadians satisfied with overall quality of health services (baseline is 85% of Canadians taken from Canadian Community Health Survey published in 2006)
Increased sustainability of the health system through the development of new initiatives (long-term funding commitments, primary health care reform, use of science and technology)	Increased number of initiatives that improve sustainability in the health system

Program Activity	Forecast Spending ($ millions)	Planned Spending ($ millions)			Alignment to Government of Canada Outcomes
	2009-10	2010-11	2011-12	2012-13	
Canadian Health System	293.1	297.3	291.2	291.8	Healthy Canadians
Canadian Assisted Human Reproduction	1.4	1.3	1.3	1.3	
International Health Affairs	21.8	21.3	20.2	20.4	
Total for SO 1	**316.3**	**319.9**	**312.7**	**313.5**	

Strategic Outcome 2: Access to Safe and Effective Health Products and Food and Information for Healthy Choices	
Performance Indicators	**Targets**
Incidence/rate of illness/risk related to health products and food	Baseline information will be established in next two years
Increased rate of adherence to/compliance by industry with the *Food and Drugs Act* and its regulations, standards and guidelines	Human drugs: 98% compliance Veterinary drugs: 95% compliance Biologics: 100% for both blood and semen compliance
Increased public confidence in available information related to health products, food and nutrition	Year-over-year improvement of Canadians being confident in the safety of the Canadian food supply

Program Activity	Forecast Spending ($ millions)	Planned Spending ($ millions)			Alignment to Government of Canada Outcomes
	2009-10	2010-11	2011-12	2012-13	
Health Products	168.8	144.7	145.9	145.4	Healthy Canadians
Food and Nutrition	66.1	69.7	66.0	63.1	
Total for SO 2	**234.9**	**214.4**	**211.9**	**208.5**	

The decrease from forecast to planned spending is a result of the implementation of process efficiencies.

Strategic Outcome 3: Reduced health and environmental risks from products and substances, and healthy, sustainable living and working environments	
Performance Indicators	**Targets**
Number of incidents of deaths, exposures, illness, injury and adverse reactions	Baseline information to be established in the next two years for defined populations
Proportion of regulatory actions addressed within service standards/targets	An average of 90%
Percentage of inspected or verified registrants/firms/users compliant/non-compliant	Baseline information to be established in the next two years for defined populations

Program Activity	Forecast Spending ($ millions)	Planned Spending ($ millions)			Alignment to Government of Canada Outcomes
	2009-10	2010-11	2011-12	2012-13	
Sustainable Environmental Health	150.7	152.2	61.1	59.7	Healthy Canadians
Consumer Products	25.6	33.9	36.9	38.1	
Workplace Health	21.6	20.2	20.1	20.1	
Substance Use and Abuse	134.2	133.6	134.8	130.3	
Pesticide Regulation	50.0	47.3	35.0	34.6	
Total for SO 3	**382.1**	**386.9**	**287.9**	**282.8**	

The decrease in planned spending from fiscal year 2010-11 to 2011-12 is primarily due to some program funding supporting sustainable environmental health scheduled to come to a close and by leveraging capacity in the area of workplace health.

Strategic Outcome 4: Better health outcomes and reduction of health inequalities between First Nations and Inuit and other Canadians	
Performance Indicators Life expectancy (at birth by gender, on and off reserve), comparison of First Nations and Inuit with other Canadians Birth weight (comparison of First Nations and Inuit with other Canadians) Infant mortality rates (comparison of First Nations with other Canadians) Rates of conditions by type—e.g., diabetes, suicide	**Targets** Interim targets for 2010/2011: • Food security pilot projects implemented in two First Nations and Inuit communities • 90% of First Nations communities with a tested pandemic preparedness and response plan • 200 sites have access to telehealth services • Accreditation of three Native Alcohol and Drug Abuse Treatment Centres • Certification of 100 additional addictions workers • 200 First Nations and Inuit youth suicide prevention projects implemented • 80 maternal child health projects implemented in 200 communities • 600 First Nations communities with diabetes prevention services

Program Activity	Forecast Spending ($ millions)	Planned Spending ($ millions)			Alignment to Government of Canada Outcomes
	2009-10	2010-11	2011-12	2012-13	
First Nations and Inuit Health Programming and Services	2,356.8	2,199.7	1,977.6	2,017.7	Healthy Canadians
Total for SO 4	**2,356.8**	**2,199.7**	**1,977.6**	**2,017.7**	

The decrease from forecast to planned spending is primarily associated with the funding of some programs coming to a close and by identifying alternative sources of funding for some initiatives outside of the Department's responsibilities.

Program Activity	Forecast Spending ($ millions)	Planned Spending ($ millions)			Alignment to Government of Canada Outcomes
	2009-10	2010-11	2011-12	2012-13	
Internal Services	358.4	327.6	309.1	301.2	Healthy Canadians
Total	**358.4**	**327.6**	**309.1**	**301.2**	

The decrease from forecast to planned spending is primarily associated with efficiency dividends realized through consolidation of certain shared services, including the streamlining of internal processes, and a more administratively efficient management of contribution agreements.

Contribution of Priorities to Strategic Outcomes

For 2010-2013, Health Canada has identified three operational and three management priorities. The operational priorities outline the planned actions to be taken to improve the delivery of the Department's programs and achieve better results for Canadians. Departmental management priorities generally focus on improving internal management practices and controls to strengthen overall performance.

Operational Priorities

Operational Priorities		
I. Modernized safety framework	Type: Ongoing	Links to Strategic Outcomes 2 and 3

Why is this a priority?

Health Canada is responsible for the regulatory regime governing the safety of a broad range of products affecting the everyday lives of Canadians, including food, pharmaceuticals, medical devices, natural health products, consumer products, chemicals, radiation emitting devices, cosmetics, and pesticides. It also helps manage the risks posed by environmental factors such as air, water, radiation and environmental contaminants.

The regulatory environment in which Health Canada carries out its health and safety mandate is changing rapidly and, while the Department's track record on food and product safety has been good, Health Canada's regulatory programs need to be modernized in step with this changing environment. To this end, the Department has made great strides under the Food and Consumer Safety Action Plan, including progress on legislative framework modernization. However, as recent events have shown, such as the Listeria outbreak, further efforts are needed to modernize the framework to enhance the Department's capacity to protect the health of Canadians.

Plans for meeting the priority

- Continue to move forward with legislative proposals to enhance the protection of the health and safety of Canadians, including the *Canada Consumer Product Safety Act*, and proposed amendments to the *Food and Drugs Act*
- Increase consistency in the departmental regulatory approach across product areas
- Provide effective management of regulatory issues and emergency preparedness management
- In collaboration with partners, respond to recommendations and lessons learned from the listeriosis incident
- Continue implementation of the Chemicals Management Plan

Operational Priorities		
II. Strengthen First Nations and Inuit health programming	Type: Ongoing	Links to Strategic Outcome 4

Why is this a priority?

While health outcomes for all Canadians are improving, First Nations and Inuit still experience serious health challenges. Health Canada continues to play an important role in supporting the delivery of, and access to, health programs and services for First Nations and Inuit. It does so by working with partners on key health challenges and on innovative approaches to strengthen access to, and encourage greater control of, health services by First Nations and Inuit. Current departmental strategies, supported by additional funding in recent Budgets, are expected to further reduce the gap between health outcomes of First Nations and Inuit and those of other Canadians.

Plans for meeting the priority

- Strengthen the First Nations health system
- Continue to explore potential to integrate and harmonize federal and provincial First Nations health programs and services through tripartite discussions
- With funding from the Canada's Economic Action Plan, continue to strengthen the provision of primary care services to First Nations communities and non-insured health benefits coverage to First Nations and Inuit, and support new and renovated health infrastructure in First Nations communities
- Support health promotion and disease prevention in First Nations and Inuit communities

Operational Priorities		
III. Health system innovation	Type: Ongoing	Links to Strategic Outcomes 1

Why is this a priority?

The health care system in Canada is vital to addressing the health needs of Canadians wherever they live and whatever their financial circumstances. The health care system also plays a significant role in the economy, accounting for over 10% of Gross Domestic Product in 2008. Given this importance, Health Canada places a priority on promoting innovation to improve the effectiveness and efficiency of this system.

Plans for meeting the priority

- Continue to work with provincial and territorial governments as well as with other health care partners on health system sustainability, including measures to improve access to physicians, nurses and other health care providers for Canadians
- Continue to work with Canada Health Infoway to accelerate the implementation of a pan-Canadian Electronic Health Record in collaboration with provincial and territorial governments.
- Collaborate with partners to address the medical imaging needs of Canadians

Management Priorities

The following three management priorities support Health Canada's ongoing efforts to achieve management excellence and promote a corporate culture that remain focussed on sound management practices and strong public service values. These Management Priorities are ongoing in nature and support all strategic outcomes.

IV. Create a more collaborative, accountable and results-driven corporate culture

Plans for meeting the priority

- Update business models in areas of policy, science, regulation and regional program delivery, to create a more collaborative, responsible and results-driven corporate culture
- Continue to implement the Department's Talent Management Strategy and transformational initiatives to maximize investments in people at all levels and in all areas of expertise (e.g., the scientific and technology communities)

V. Enhance corporate processes for increased accountability and effectiveness

Plans for meeting the priority

- Increase the integration of planning, monitoring and reporting to improve information, with an emphasis on performance measurement, enabling decision-making affecting the Department's current and future operations
- Enhance the Financial Management Control Framework to ensure the effective allocation and monitoring of financial resources to achieve departmental objectives and priorities
- Increase the effectiveness of grants and contributions program management to provide for a more risk-based approach for decision-making to ensure a stronger focus on higher risk areas

VI. Increase transparency and innovative engagement with Canadians

Plans for meeting the priority

- Develop effective, up-to-date departmental tools and processes to engage Canadians
- Establish systematic, comprehensive departmental approaches to communicate and collaborate with stakeholders as well as engage citizens in the development, and review of departmental policies and programs
- Further implement means to ensure public access to timely, relevant health and safety information

Risk Analysis

As Health Canada strives to achieve its strategic objectives and priorities, it will face challenges and opportunities, both of which will have an impact on its ability to deliver programs. The Department operates in an ever evolving environment characterized by an increasing pace of socio-economic change, globalization and growing expectations on the part of the public for accountability and information. There are also a number of external and internal risk factors the Department must be prepared to address if it is to effectively deliver on its mandate.

As in the past, Health Canada will continue to face key challenges from events that may adversely affect the health of Canadians. The source of an incident could be an external development or event, such as the emergence of a new influenza virus or food borne illness, or result from the action of an external organization, such as that resulting from the supply disruption of medical isotopes. The Department maintains ongoing activities to ensure that it will be prepared to effectively respond to, and minimize the impact on the health of Canadians from incidents relating to food, drug or product safety. Such activities include modernizing its legislative and regulatory framework, and increasing the consistency in the departmental approach across product lines.

Health Canada faces financial constraints from rising program costs associated with the delivery of health care to First Nations and Inuit. The growing Aboriginal population with a higher than average rate of injuries and disease burden, and the remoteness of many First Nations and Inuit communities places increasing demands on health care services. This challenge is amplified by the national shortage of nurses and community medical specialists which continues to put pressure on Health Canada's ability to provide health care service to First Nations, particularly in remote northern communities. In response, Health Canada continues to work to integrate and harmonize federal, provincial and territorial health programs through tripartite agreements with the aim of addressing availability and access to quality health services.

In delivering various aspects of its mandate, Health Canada works with a range of external parties, such as health portfolio organizations, other government departments, other levels of government, industry and national and international organizations. This diversity of inter-relations complicates the understanding of roles and responsibilities, and requires more complex delivery approaches, shared action and horizontal delivery strategies. To improve alignment with external parties, Health Canada continues to review protocols and communications with external partners through lessons learned following major health incidents.

There is an expectation on the part of the public that Health Canada will provide timely and authoritative evidence-based information to assist Canadians in making informed decisions. With increasing globalization, rapidly evolving science and technology and a 24-hour news cycle, many Canadians learn of health events in the media and seek immediate information. A key source of information for Canadians is the Internet where incomplete or incorrect health and safety information can pose a risk to Canadians. Health Canada is working to establish comprehensive approaches to communicate with, engage and collaborate with stakeholders and citizens to improve public access to timely, relevant health and safety information.

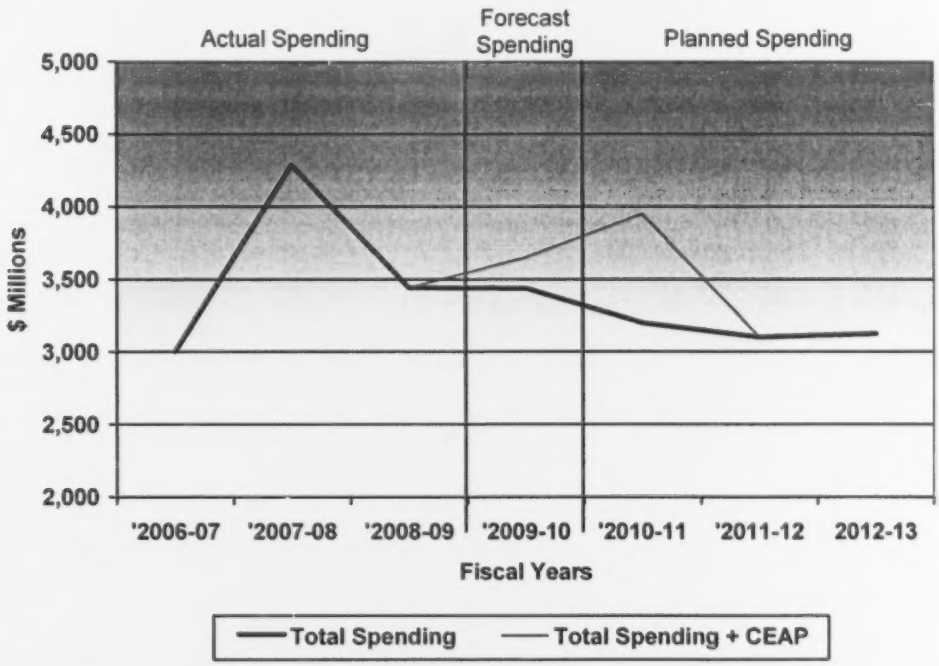
The regulatory programs at Health Canada also face an increasingly complex environment driven by global supply chains and changing demographics that are driving demand for an increased diversity of products. Also, the Department is facing an increased need to hire experienced professionals due to an ageing workforce and increasing rate of scientific staff eligible for retirement. The Talent Management Strategy and other transformational initiatives will continue to ensure investments in people at all levels and in all areas of expertise, including the scientific and technology and health care practitioner communities.

Expenditure Profile

For the 2010-11 fiscal year, Health Canada plans to spend $3,448.5 million to meet the expected results of its program activities and contribute to the achievement of its strategic outcomes.

The figure below illustrates Health Canada's spending trend from 2006-07 to 2012-13.

Spending Trend



For the 2006-07 to 2009-10 periods, the total spending includes all Parliamentary appropriation sources: Main Estimates, Supplementary Estimates, and Treasury Board Votes 10, 15, and 23. For the 2010-11 to 2012-13 periods, the total spending corresponds to planned spending. Supplementary funding and carry forward adjustments are not reflected. The decrease in planned spending is associated primarily with the funding of certain programs coming to a close and with the implementation of 2009 Strategic Review decisions.

In 2007-08, actual spending was $1 billion more than originally planned due to the settlement of compensation payments to individuals infected with the Hepatitis C virus through the Canadian blood supply before 1986 and after 1990.

In 2010-11, the increase in Total Spending + CEAP is due to the inclusion of $500M for additional funding to Canada Health Infoway Inc. Following the Auditor General of Canada's Report of November 3, 2009, Canada Health Infoway is implementing its recommendations to ensure proper accountabilities are in place. The Government will continue to work with Canada Health Infoway to assess progress before taking next steps.

Canada's Economic Action Plan

Health Canada was allocated $963.2 million ($211.9 M - 2009-2010; $751.3 M - 2010-2011) under Canada's Economic Action Plan (CEAP), as announced as part of Budget 2009. This funding has been designated to support six initiatives that reflect CEAP guiding principles and meet important departmental priorities. They are:

1. $0.3 million in 2009-2010 for a one-year extension of the Canadian Environmental Sustainability Indicators
2. $500 million for additional funding to Canada Health Infoway Inc., would be governed by the terms and conditions of a new agreement between Infoway and Health Canada
3. $6.8 million in 2010-2011 for a one year extension for the Accelerated remediation of sites initiative under the Federal Contaminated Sites Action Plan
4. $304.9 million ($135 M - 2009-2010; $169.9 M - 2010-2011) to strengthened Non-Insured Health Benefits program and enhanced support for primary care services for First Nations and Inuit
5. $135 million ($67.4 M - 2009-2010; $67.4 M - 2010-2011) for infrastructure investments through the Health Facilities and Capital Program (HFCP) for First Nations and Inuit
6. $16.3 million ($9.2M - 2009-2010; $7.1 M - 2010-2011) for investments in the maintenance and modernization of Health Canada's laboratories

More information about these initiatives is available in Section II of this report or visit the Canada's Economic Action Plan web site.

Voted and Statutory Items

The table below provides information on the Health Canada resources approved by Parliament. The table also shows changes in resources derived from supplementary estimates and other authorities.

Vote # or Statutory Item (S)	Truncated Vote or Statutory Wording	2009-10 Main Estimates ($ millions)	2010-11 Main Estimates ($ millions)
1	Operating expenditures	1,788.4	1,876.1
5	Capital expenditures	40.8	37.7
10	Grants and contributions	1,422.7	1,382.7
(S)	Minister of Health – Salary and motor car allowance	0.1	0.1
(S)	Contributions to employee benefit plans	116.7	122.8
	Total	**3,368.7**	**3,419.4**

Section II – Analysis of Program Activities by Strategic Outcome

Strategic Outcome 1:

Accessible and sustainable health system responsive to the health needs of Canadians

Canadian Health System	Canadian Assisted Human Reproduction	International Health Affairs

Maintaining the accessibility and sustainability of Canada's health system is a shared responsibility requiring for Health Canada to work closely with provincial and territorial governments, as well as health organizations and other stakeholder groups. With Health Canada playing a significant role, the Department continually examines new and innovative approaches and responses to the health priorities and needs of Canadians.

Serving as a partner, an enabler, an innovator, a knowledge broker and a proponent of transparency and accountability, Health Canada plays a role in supporting the sustainability of Canada's health system. To Canadians, sustainability means the availability, maintenance and advancement of key attributes of Canada's publicly funded health system such as accessibility, efficiency and effectiveness. In the face of perpetually shifting and growing health system demands, the Department develops policies in support of a sustainable health system for Canadians.

Program Activity: Canadian Health System

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
297.3	291.2	291.8

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
330	327	327

This program activity provides strategic policy advice on health care issues such as improved access, quality and integration of health care services to better meet the health needs of Canadians, wherever they live or whatever their financial circumstances. The objective is pursued mindful of long-term equity, sustainability and affordability considerations and in close collaboration with provinces and territories, health professionals, administrators, other key stakeholders and citizens.

Improved access, quality and integration of health services administration is achieved through investments in the health system and in health system renewal; for instance by reducing wait times for essential services, by working with provinces and territories to ensure that the principles of the *Canada Health Act* are respected, by developing health information and health measures for Canadians, by meeting the health and health access needs of specific groups, such as official language minority communities, and by ensuring the implementation of agreements between federal/provincial/territorial ministers of Health.

Benefits for Canadians: This program activity supports the success of the health care system serving Canadians, particularly with respect to improving access, quality and integration of health care services.

Expected Results of Program Activity: Improved health care system planning and performance, including wait times reduction Enhanced capacity of governments and stakeholders to support health system planning Awareness and understanding among health sector decision-makers and,the public of the factors affecting accessibility, quality and sustainability of Canada's health care system and the health of Canadians	
Performance Indicators:	***Targets:***
Reports and analyses related to issues such as wait times reduction, health human resources planning, and provision of chronic, palliative and continuing care are used to improve the health care system	Increased awareness and knowledge of new approaches, models and best practices related to health care renewal
Governmental and stakeholder engagement activities (e.g., meetings, workshops, conferences, program and policy proposals)	Increased collaboration and consultation between governments and stakeholders to advance key health care issues
Publication of information that raises awareness and understanding of the factors affecting accessibility, quality and sustainability of Canada's health care system and the health of Canadians	Timely and accessible health research and information on priority health issues available to Canadians

Canada's Economic Action Plan (CEAP)

Budget 2009 identified multi-year funding of $500 million to Canada Health Infoway to support the goal of establishing Electronic Health Records for 50 per cent of Canadians by 2010; to speed up the implementation of Electronic Medical Records systems in physician offices; and to integrate points of service for hospitals, pharmacies, community care facilities, and patients. This additional investment would be governed by the terms and conditions of a new funding agreement. Following the Auditor General of Canada's Report of November 3, 2009, Canada Health Infoway is implementing its recommendations to ensure proper accountabilities are in place. The Government will continue to work with Canada Health Infoway to assess progress before taking next steps.

Planning Highlights

The ongoing responsibilities indicated above will continue. In addition, Health Canada and the Government of Canada will keep working with the provinces, territories and health partners to bring about more health system improvements. Various areas of action identified as part of the departmental operational priority "Health System Innovation" are undertaken as part of this program activity, including:

- The Department will continue to work with provinces and territories on health system sustainability. Objectives of this work will be to improve access to physicians, nurses and other health care providers through measures under the Health Human Resources Strategy, initiatives aimed at internationally-educated health professionals and work with specific partners in the health care sector on issues of shared importance. As listed above as a CEAP initiative, another goal will be accelerated development and implementation of electronic health technologies through collaboration with Canada Health Infoway once proper accountabilities are in place, as per the Auditor General of Canada's Report of November 3, 2009.

- Health Canada will work closely with the Public Health Agency of Canada, provinces and territories, and other partners to assess and analyze the government's response to the H1N1 outbreak with the goal of further strengthening Canada's pandemic readiness.

- Health Canada will continue to support the ongoing efforts of the medical community, and the provinces and territories, to minimize the impact of medical isotope supply disruptions on the Canadian health care system and

will continue to review other sources and alternatives to isotopes to ensure that they are safe and effective for Canadians.

Program Activity: Canadian Assisted Human Reproduction

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
1.3	1.3	1.3

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
8	8	8

This program activity implements the *Assisted Human Reproduction Act*, which seeks to protect and promote human health, safety, dignity and human rights in the use of Assisted Human Reproduction (AHR) technologies. It develops policies and regulations in the area of assisted human reproduction. The science of AHR is evolving rapidly and, as a result, the program activity engages stakeholders on an ongoing basis to find a balance between the needs of patients who use these technologies to help them build their families, the children born from these technologies and the providers of these services with health and safety as the overriding factors. The goal of the policies and regulations is to develop a responsive regulatory regime which is a leader both domestically and in the international AHR community, and reflects the objectives put forward in the *Assisted Human Reproduction Act*. The program activity gathers input from stakeholders, including the provinces, to ensure a pan-Canadian approach.

Benefits for Canadians: This program activity helps generate responsive policies and regulatory frameworks that reflect the interests of all stakeholders in the assisted human reproduction sector, including the Canadians involved in AHR activities.

Expected Results of Program Activity: Increased input of Canadian stakeholders on assisted human reproduction technologies Increased knowledge of the application of assisted human reproduction procedures in Canada Health and safety risks related to assisted human reproduction technologies addressed	
Performance Indicators:	***Targets:***
Stakeholder and advisory panel involvement and engagement	Increased stakeholder coordination and consultation on key assisted human reproduction issues to support and advance regulatory development
Monitoring, collection, and analysis of relevant and current information in assisted human reproduction practices leading to the development of evidence-based policy documents	Improved monitoring and awareness of assisted human reproduction practices leading to an increased number of evidence-based policy documents to support regulatory development
Reports and supporting documentation on relevant issues addressed through appropriate regulations and other instruments developed to enforce the *Assisted Human Reproduction Act*	Assisted Human Reproduction Regulations and other instruments to protect the health, safety, dignity, and rights of Canadians using assisted human reproduction technologies and children born from the use of these technologies

Planning Highlights

Health Canada will continue to work with Assisted Human Reproduction Canada on the policies and regulatory regime required to put the *Assisted Human Reproduction Act* into full operation.

Program Activity: International Health Affairs

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
21.3	20.2	20.4

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
26	15	15

Health Canada works internationally through leadership, partnerships and collaboration to fulfill its federal mandate of making Canada's population among the healthiest in the world. International Affairs serves as the Department's focal point to initiate, coordinate, and monitor departmental policies, strategies and activities that help promote Canadian priorities and values on the international health agenda. International collaboration on global health issues is important given that the health of Canadians is influenced significantly by public health risks originating from other countries. Global issues such as pandemic influenza preparedness, HIV/AIDS strategies and global health security are addressed with key external health partners such as the World Health Organization (WHO) and the Pan American Health Organization (PAHO).

Countries and international organizations want to connect quickly to information about Canada's health care system and initiatives. This program activity strives to share Canada's best policies and practices with other countries, and assists in the development of bilateral agreements with numerous countries on important health issues. This program activity delivers strategic policy advice on international health issues to the Minister of Health, senior management and the Health Portfolio, including appropriate representation at international fora concerning the health portfolio. It also manages grants to non-profit organizations for projects in the domain of international health that are aligned with Canada's priorities in global health.

Benefits for Canadians: Health Canada collaborates with health partners internationally to promote the priorities and values of Canadians and to promote and protect the health of Canadians through this program activity.

Expected Results of Program Activity:
Increased knowledge and understanding of current and emerging international health issues
Enhanced multilateral, bilateral, regional and intersectoral collaboration on current and emerging international health issues of priority to Canada
Influence the international health agenda in a manner that supports Canada's health priorities, foreign policy and development objectives

Performance Indicators:	***Targets:***
Strategic engagement with stakeholders and other governments (e.g. consultations and outreach activities with key stakeholders and international partners)	Increased awareness and knowledge of new approaches, models and best practices related to international health priority issues
Number of new collaborations with key stakeholders on current and emerging international health issues of priority to Canada	Increased strategic engagement in international meetings, conferences and fora; and an increased number of Canadian representatives on the boards or committees of key international health organizations
Number of multilateral, bilateral negotiations or agreements that Health Canada leads or supports in order to advance Canada's health priorities	An increase in the number of resolutions or policy positions introduced by Health Canada which reflect Canadian priorities, and policy objectives and an increase in the number of international agreements, treaties or memoranda of understanding which advance Canada's health priorities

Planning Highlights

Work under this program activity will support the achievement of all departmental operational priorities by facilitating the engagement of Canada with partner countries, such as the US and Mexico, and with multilateral and international organizations. It is expected that global health challenges, such as H1N1, will be particularly prominent.

- Health Canada will continue to engage the key partners noted in the program activity description and with health, academic and other non-governmental organizations to address emerging international health issues and their impacts on Canadians.

- The Department will continue to build strong bilateral relationships with key countries and regions of interest, including with emerging economies (China, Brazil) and key multilateral partners. A coordinated approach will focus Health Canada efforts on opportunities most likely to have an impact on the health of Canadians and situations in which Canada can demonstrate health leadership in the Americas and in the Asia-Pacific region, as well as through partnerships such as the Global Health Security Initiative.

- Canada's engagement in the WHO as a member of its Executive Board over the next three years will provide an opportunity to advance Canadian values and advance Canadian health priorities.

Strategic Outcome 2:

Access to Safe and Effective Health Products and Food, and Information for Healthy Choices

Health Products

Food and Nutrition

Under this strategic outcome, Health Canada is committed to promoting and protecting the health and safety of Canadians by working towards reducing health risks from health products and food and by providing information so Canadians can make informed decisions and healthy choices.

As the federal authority responsible for the regulation of health products and food, Health Canada evaluates and monitors the safety, quality and efficacy of health products as well as the safety and nutritional quality of food. The Department also promotes the health and well-being of Canadians through a broad range of activities related to health products and food, including developing nutrition policies and standards such as Canada's Food Guide and information to the public in newsletters such as It's Your Health.

Program Activity: Health Products

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
144.7	145.9	145.4

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
1,782	1,781	1,778.0

The Health Products program activity is responsible for a broad range of health protection and promotion activities that affect the everyday lives of Canadians. Under the authority of the *Food and Drugs Act* and Regulations, and the *Department of Health Act*, this program activity evaluates and monitors the safety, quality and effectiveness of drugs (human and animal), biologics, medical devices and natural health products, and conducts surveillance, compliance and enforcement activities. This program activity also provides timely, evidence-based and authoritative information to stakeholders (including but not limited to: health care professionals such as physicians, pharmacists and practitioners such as herbalists, naturopathic doctors and Traditional Chinese Medicine practitioners) and members of the public to enable them to make informed decisions and healthy choices.

Benefits for Canadians: This program activity helps to protect Canadians from undue risks associated with health products and provides information to Canadians that help them to make informed decisions about their health.

Expected Results of Program Activity:

Increased the safety, quality and efficacy of health products imported into and/or manufactured in Canada
Reduced exposure to health risks related to health products
Increased ability to monitor and identify safety concerns
Increased industry awareness and knowledge of regulatory requirements
Safer use of health products by consumers and health professionals
Increased knowledge of post-market drug safety and effectiveness to inform decisions
Reduction in prohibited and unapproved health products entering Canada
Enhanced capacity of Health Canada and industry to identify and respond to risk issues
By 2013, implementation of the five-year Food and Consumer Safety Action Plan

Performance Indicators:	*Targets:*
Proportion of regulatory reviews done within service performance standards	Human drugs: 90% Veterinary drugs: 90% Biologics and Radiopharmaceuticals: 90% Medical devices: 90%
Percentage of natural health product pre-market submission backlog completed	100% addressed by March 31, 2010 100% completed by December 31, 2010
Number of reports on pharmacovigilance plans received	Year-over-year increase in pharmacovigilance plans received
Number of Risk Management and Mitigation Plans received	Year-over-year increase in Risk Management and Mitigation Plans received
Number of pre-submission meetings held per year	In 2008/09, 49 pre-submission meetings with industry were held for biologic and radiopharmaceutical drugs and expect to receive 59 pre-submission meeting requests in 2009/10. Anticipate a similar amount in pre-submission meeting requests for biologics and radiopharmaceuticals in 2010-11 In 2008/09, 135 requests were received and accepted for pre-submission meetings with industry for pharmaceutical drugs and expect to receive 125 in 2009/10. Anticipate a similar amount in pre-submission meeting requests for pharmaceutical drugs for 2010-11
Number of Product Monographs made available to the public	In 2010-11, anticipate to have reached an estimated posting of 2000 product monographs on the Health Canada website
Reduction in prohibited and unapproved heath products entering into Canada	A yearly increase of Health Canada's oversight of imported health products
Number of hospitals reporting adverse events	Year-over-year increase in adverse reaction reports from hospitals
Number of Periodic Safety Update Reports received	Year-by-year increase in Periodic Safety Update Reports received

Planning Highlights

Most of the work under this program activity will involve the ongoing activities included in the description above. This program activity will also be critical for progress on the Department's "Modernized safety framework" operational priority, including support for the Government commitment to modernize the legislative framework for health products, as indicated in recent Speeches from the Throne and Budgets. As part of its commitment to longer-term innovation and improvement of Canada's health products regulatory activities, the Department will address four major areas of action during 2010-2011.

- Health Canada will support parliamentary consideration of any legislation affecting health products as well as work to make any regulatory and operational changes needed.

- As noted in Section I, the Department will also pursue a more consistent approach to its regulatory activities across the full range of its responsibilities. This will put into place a more consistent risk-based approach within and across regulatory frameworks.

- The Department will ensure it has the flexibility in its regulatory activities to act promptly when health situations emerge that call for time-sensitive reviews, approval decisions and monitoring of products such as new vaccines

developed to respond to a pandemic threat or other sources and alternatives to isotopes to minimize the impact of supply disruptions.

- Because health products are used in many countries, Health Canada is devoting more attention to monitoring international experiences. The Department will continue to enhance the tracking and use of this information. This will enable more efficient and effective identification of potential situations that may need to be investigated or addressed.

Program Activity: Food and Nutrition

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
69.7	66.0	63.1

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
603	599	583

The Food and Nutrition program activity establishes policies, regulations and standards related to the safety and nutritional quality of food. Food safety standards are enforced by the Canadian Food Inspection Agency. The legislative framework for food is found in the *Food and Drugs Act* and Regulations, the *Canadian Food Inspection Agency Act* and the *Department of Health Act.* The program activity also promotes the nutritional health and well-being of Canadians by collaboratively defining, promoting and implementing evidence-based nutrition policies and standards. As the focal point and authoritative source for nutrition and healthy eating policy and promotion, the program activity disseminates timely, evidence-based and authoritative information to Canadians and stakeholders to enable them to make informed decisions and healthy choices.

Benefits for Canadians: This program activity contributes to the protection of Canadians from unsafe foods and helps Canadians to make more informed decisions about their health.

Expected Results of Program Activity: Reduced exposure to health risks related to Food and Nutrition Increased level of informed choices/healthy decisions related to food and nutrition Establishment of regulatory and non-regulatory measures to address immediate areas of concern	
Performance Indicator:	***Targets:***
Level of Stakeholder and Public Awareness	Health Canada anticipates distributing over 3,500,000 copies of Eating Well with Canada's Food Guide (English and French), over 1,200,000 visits to the Food Guide main page and over 350,000 visits to the My Food Guide online web page Efforts to increase consumer awareness of the Nutrition Label will continue and in 2010-11, Health Canada anticipates over 5,000 visitors using the Interactive Nutrition Labelling Quiz Health Canada will continue to strengthen capacity building by interpreting and sharing results from the Canadian Community Health Survey 2.2, Nutrition Focus Health Canada will establish a Food Regulatory Advisory Committee that will provide broad expert strategic policy advice on the safety of food products and will be composed of representatives from key stakeholder groups • Host a technical consultation on its proposed maximum limits (standards) for the presence of the mycotoxin Ochratoxin A in foods

	• Publish a report summarizing the input received during the stakeholder consultations on the enhancement of precautionary labelling of allergens in food
Number of educational tools developed	Health Canada will also develop and disseminate: education tools: • Guidance on the preparation of powdered infant formula in the home and hospital/care settings • Health Canada will release materials for health professionals and pregnant women to support the implementation of new gestational weight gain guidelines
Proportion of Health Risk Assessments for acute health risks communicated to stakeholders within service standards (as part of the Rapid Response pillar of the Food and Consumer Safety Action Plan)	90% within 24-48 hours
Proportion of Health Risk Assessments related to health risks of lesser severity communicated to stakeholders within service standards (as part of the Rapid Response pillar of the Food and Consumer Safety Action Plan)	90% within 5-10 days

Planning Highlights

This program activity will continue to be devoted largely to ongoing activities designed to address the food and nutrition concerns of Canadians within Health Canada's mandate. It will also be a focal point for the "Modernized safety framework" operational priority described in Section I, particularly through progress on the Government's Food and Consumer Safety Action Plan. As part of a commitment to longer-term innovation and improvement, the Department has identified three high-level areas for action.

- Health Canada will support any parliamentary consideration of the *Food and Drugs Act*. The Department will also work with the Canadian Food Inspection Agency and other departments to make any regulatory and operational changes needed under the legislation. This will improve the framework for addressing food and nutrition issues which should lead to reduced health risks to Canadians.

- Health Canada was one of a number of departments and agencies that were involved in addressing the 2008 listeriosis incident. It will apply its own lessons learned and respond to recommendations of the Independent Investigator on the 2008 listeriosis outbreak on improvements that might minimize the risks of such events in the future and improve responses if they do occur. Actions, often involving partners, will include an updated Listeria Policy, strengthened risk assessment capacity, improved detection methods for hazards in foods and a guidance document on the weight of evidence needed to support appropriate and timely actions for food recalls.

- Under the Growing Forward Initiative, Health Canada will work with Agriculture and Agri-Food Canada to enhance regulatory responsiveness in the areas of health claims, novel foods and food ingredients, consistent with the Department's commitment to ensure that Canadians can make informed choices on health and nutrition.

Strategic Outcome 3:

Reduced health and environmental risks from products and substances, and healthy, sustainable living and working environments

- Sustainable Environmental Health
- Consumer Products
- Workplace Health
- Substance Use and Abuse
- Pesticide Regulation

Health Canada is responsible for assessing and acting on many elements of day-to-day living that have impacts on the health of Canadians. These include drinking water safety, air quality, radiation exposure, substance use and abuse (including alcohol), consumer product safety, tobacco and second-hand smoke, workplace health, and chemicals in the workplace and in the environment. The Department is also engaged in chemical and nuclear emergency preparedness, inspection of food and potable water for the travelling public and health contingency planning for visiting dignitaries.

Much of this work is governed by legislation such as the *Canadian Environmental Protection Act, 1999*, the *Controlled Drugs and Substances Act*, the *Hazardous Products Act*, the *Tobacco Act*, the *Food and Drugs Act*, the *Radiation Emitting Devices Act*, the *Quarantine Act*, the *Pest Control Products Act* and others.

Program Activity: Sustainable Environmental Health

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
152.2	61.1	59.7

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
828	612	612

Environmental factors continue to be a key determinant of health for all Canadians. This program activity promotes and protects the health of Canadians by identifying, assessing and managing health risks posed by environmental factors in living, working and recreational environments. The scope of activities includes: research on drinking water quality, air quality, contaminated sites, toxicology and climate change; clean air programming and regulatory activities; risk assessment and management of: chemical substances, environmental noise, environmental electromagnetic frequencies, products of biotechnology and products of other new and emerging technologies (including nanotechnology); solar ultraviolet radiation; preparedness for radio-nuclear, chemical and biological incidents as well as working with the passenger conveyance industry to protect the travelling public.

Under the Sustainable Environmental Health program activity, Health Canada delivers on the Government of Canada's Chemicals Management Plan (CMP) by assessing the health risks of and developing risk management strategies for existing chemicals that enter the environment through manufacturing, use in consumer products, or their disposal. Key initiatives under the CMP that support this program activity include: implementing a national bio-monitoring system to track exposure to potentially harmful chemicals; working with industry sectors to develop comprehensive risk management practices that will protect Canadians and the environment; and ensuring that information about chemical substances, their hazards and practices for their safe management is available to Canadians. Under this program activity, Health Canada also works to protect the health of Canadians by assessing and managing new chemicals as well as working with other jurisdictions in improving air quality and safe drinking water.

Benefits for Canadians: In cooperation with Environment Canada, Health Canada works to protect the health of Canadians from environmental risks under this program activity.

Expected Results of Program Activity:	
Timely regulatory system response to new and emerging health risks related to chemicals or substances that are harmful to human health or the environment, and environmental risks to health New and emerging health risks related to chemicals or substances that are harmful to human health or the environment are identified, assessed and managed Canadians are knowledgeable of, understand, and are involved in environmental health issues	
Performance Indicators:	***Targets:***
Proportion of regulatory activities addressed within service standards/target	To be set after baseline is established in 2011
Time period within which serious health risks are brought into a risk management regime	
Percentage of the target population aware of environmental health issues	

Canada's Economic Action Plan (CEAP)

Budget 2009 identified $6.8 million in 2010-2011 which provides for a one year extension for the Accelerated Remediation of Sites initiative under the Federal Contaminated Sites Action Plan. The one year extension will support program management and additional assessments of priority federal contaminated sites contributing to an improved environment as well as economic development and creating employment opportunities. Health Canada's role is to provide guidance, training and advice on human health risk assessment to federal custodial departments responsible for contaminated sites.

Planning Highlights

In addition to the regular functions under this program activity, the Department will undertake actions in key areas to address the stated operational priority "Modernized Safety Framework":

- The Department will continue to focus on implementation of its commitments under the Chemicals Management Plan and will work with Environment Canada to develop and implement a regulatory framework under the Clean Air Agenda to improve air quality and address risks to the health of Canadians.

- Specific environmental health situations that may arise will be tracked and acted upon, including the Department's emergency preparedness roles related to radio-nuclear, chemical and biological incidents as well as pandemic threats to Canadians. This will help to realize the expected result for this program activity of a timely response and more knowledgeable Canadians.

Program Activity: Consumer Products

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
33.9	36.9	38.1

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
265	288	292

Health Canada identifies, assesses, manages and communicates to Canadians the health and safety risks associated with consumer products (those products that adults and children commonly use for personal, family, household and garden use or use in recreational and sports activities). This is achieved through compliance and enforcement actions, consumer and industry outreach activities and surveillance and risk assessment work. Relevant acts include: *Hazardous Products Act* (consumer products) and *Food and Drugs Act* (cosmetics regulations).

Benefits for Canadians: Actions under this program activity minimize the risks that consumer products may pose to Canadians.

Expected Results of Program Activity: Increase effective use of standards by industry and improved compliance with product safety obligations Better informed consumers properly selecting and safely using products Responsive and proactive, risk-based product safety regulatory framework	
Performance Indicators:	***Targets:***
Percentage of inspected registrants/firms/users who are compliant/ non-compliant with product safety obligations	Corrective action taken on 100% of non-compliant products inspected identified through targeted cyclical enforcement plan
Number of incidents reported of improper/unsafe use of consumer products	Year-over-year decreasing trend in number of reported incidents measured against baseline data to be established in 2010
Percentage of issues addressed under product safety legislation and its regulations	Year-over-year improvement in the number of issues addressed. Targeting 100% of issues addressed by 2014

Planning Highlights

Beyond its ongoing activities, this program activity is linked to the operational priority "Modernized Safety Framework". The Government's Food and Consumer Safety Action Plan will continue to serve as a framework for action through a modernized legislative framework and improved regulatory processes, as indicated in recent Speeches from the Throne and Budgets. The expected results will include avoiding as many incidents as possible, based on the prevention of harm before it occurs, targeting the areas of highest risk, to ensure that health and safety standards are being met and providing rapid response when required. The Department has identified two high-level items on the agenda for the program activity as part of a commitment to longer-term innovation and improvement.

- Health Canada will support parliamentary consideration of any legislation affecting food, health and consumer products as well as work to make any regulatory and operational changes needed.

- This program activity will be included in the departmental commitment to adopt a more consistent approach to regulatory action across all product areas. It is expected that a more rigorous process of risk assessment and new mitigation policies and procedures will be established for consumer products. Work will take place with industry to promote awareness and provide regulatory guidance, consistent with the expected results described above.

Program Activity: Workplace Health

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
20.2	20.1	20.1

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
331	331	331

This program activity provides services to protect the health and safety of the federal public sector, visiting dignitaries, and others. Specific programs include: the provision of occupational health services to federal employees; delivery of the Employee Assistance Program; emergency health services to Internationally Protected Persons; and, dosimetry services (the measurement of personal, occupational exposure to radiation through the reading of "dosimeters" or plaques enclosed in special holders worn by the user for specified periods).

Benefits for Canadians: This program activity supports a well-functioning and healthy public service to provide services to Canadians and seeks to provide emergency health services to Internationally Protected Persons visiting Canada.

Expected Results of Program Activity:
Timely system response to public service employees with psycho-social health problems
Internationally Protected Persons are protected during regular visits, major events and Prime Minister-led events from risks to their health
Support to departments which enables adherence to Acts, regulations and guidelines

Performance Indicators:	***Targets:***
Percentage of public service employee clients' psycho-social problems dealt with within service standards	70% (represents the current Industry standard)
Percentage of visits/events without serious health related incidents for Internationally Protected Persons or for Canadian Public Servants	100%

Planning Highlights

This program activity will continue to address its ongoing responsibilities in order to generate the expected results described above. For example, the Department will deliver high-profile health services at the G8 and G20 meetings. It will also contribute to the operational priority "Modernized Safety Framework", by coordinating activities related to pandemic preparedness in departmental and Health Portfolio workplaces, which will demonstrate a modernized approach to emergency preparedness management.

Program Activity: Substance Use and Abuse

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
133.6	134.8	130.3

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
465	479	476

Through regulatory, programming and educational activities, Health Canada seeks to improve health outcomes by reducing and preventing tobacco consumption and addressing alcohol and drug abuse. Through the *Tobacco Act* and its regulations, along with the new *Cracking Down on Tobacco Marketing Aimed at Youth Act*, Health Canada

regulates the manuf[illegible]re, sale, labelling, and promotion of tobacco products. It also leads the Federal Tobacco Control Strategy – the [illegible]als of which are to: further reduce the prevalence of smoking; reduce exposure to second hand smoke; and, reduce death and disease caused by smoking.

Health Canada administers the *Controlled Drugs and Substances Act* and its regulations. Through four regional labs, Health Canada provides expert scientific advice and drug analysis services to law enforcement agencies. The Marihuana Medical Access Regulations control the authorization for use and cultivation of marihuana by those suffering from grave and debilitating illnesses. Health Canada is a partner in the government's National Anti-Drug Strategy which includes: prevention programming aimed at youth; facilitating access to treatment programs; compliance and enforcement activities related to controlled substances and precursor chemicals; and, increased resources to the Drug Analysis Service to support the increase in law enforcement resources.

Benefits for Canadians: This program activity helps to address the serious and adverse health effects presented by the use of tobacco products and abuse of controlled substances, which contributes to safer and healthier communities and Canadians.

Expected Results of Program Activity:	
The overall goal of the Federal Tobacco Control Strategy is to reduce overall smoking prevalence from 19% (2006) to 12% by 2011 Reduced use and abuse of drugs Continued provision of high-quality evidence for law enforcement Increased compliance with legislation and regulations Increased awareness and understanding of illicit drugs and harmful health and social effects associated with illicit drug use Strengthened evidence-informed substance abuse treatment systems and services	
Performance Indicators:	***Targets:***
Smoking prevalence rate in % of the Canadian Population	12% (Canadian Tobacco Use Monitoring Survey)
Prevalence rates of drug use and abuse	To be set after baseline is established in 2010
Number/nature of injuries and/or environmental risk caused by unsafe handling of chemicals noted by Drug Analysis Service personnel	
Rates of compliance with policies and regulations	
Level of awareness about harmful health and social effects associated with illicit drug use	
Extent to which the Drug Treatment Funding Program has contributed to and strengthened, evidence-informed substance abuse treatment systems and services	

Planning Highlights

- Ongoing activities and support should continue to help generate the expected results indicated above. This program activity will also demonstrate the Health Canada commitment to a modernized safety framework, as described in Section I. The focus of modernization will be on new responsive and efficient regulatory processes, including the implementation of the new *Cracking Down on Tobacco Marketing Aimed at Youth Act* which aims to protect children and youth from tobacco industry marketing practices that encourage them to use tobacco products.

Program Activity: Pesticide Regulation

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
47.0	35.0	34.6

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
588	501	501

To help prevent unacceptable risks to people and the environment, and facilitate access to sustainable pest management tools, Health Canada, through the Pest Management Regulatory Agency, regulates the importation, sale and use of pesticides under the federal authority of the *Pest Control Products Act* and its Regulations.

Benefits to Canadians: This program activity contributes to reducing health and environmental risks from pesticides and provides information to Canadians so they can make informed decisions about pesticide use.

Expected Results of Program Activity:	
Canadians have timely access to new pesticides/pesticide uses that meet standards of value, acceptable human health and environmental risk Only those older pesticides that meet modern standards remain registered Registrants, vendors and users comply with the *Pest Control Products Act* and its regulations Canadians have access to and are using reduced risk and low risk products and risk reduction strategies	
Performance Indicators:	***Targets:***
Pre-market reviews and regulatory decisions on new pesticide products and new uses of pesticide products completed within performance timelines that meet international standards	90% of reviews completed within performance timeline targets
Re-evaluation assessments completed within commitments under the Chemicals Management Action Plan	90% of older registered pest control products have undergone a full review in the last 15 years
Delivery of the National Pesticides Compliance Program including associated investigations / enforcement responses	80% of compliance programs and enforcement activities delivered and reported according to timelines
Development of new transition strategies to use of lower risk pesticides	Increased availability of reduced risk and low risk pesticide products
Number of user groups engaged in risk reduction strategies	Increased engagement of stakeholder groups in the development of new transition strategies

Planning Highlights

Along with the array of ongoing activities noted in the program activity description above, the continued implementation of all aspects of the *Pest Control Products Act* and support for re-evaluation of pesticides through the Chemicals Management Plan will demonstrate how Health Canada is responding to the operational priority to modernize its safety framework.

Strategic Outcome 4:

Better Health Outcomes and Reduction of Health Inequalities between First Nations and Inuit and Other Canadians

First Nations and Inuit Health Programming and Services

Health Canada delivers or funds a range of health programs and services to First Nations and Inuit. A range of primary care services are provided in approximately 200 First Nations communities, largely in rural or remote areas where access to provincial health care services is limited. In addition, home and community care services are provided in approximately 600 First Nations communities. Health Canada supports a range of community-based health programs, focusing on children and youth, mental health and addictions, and chronic disease and injury prevention. The Department also delivers a range of public health programs with a focus on communicable disease control, including tuberculosis, HIV/AIDS and vaccine-preventable diseases, environmental public health such as conducting public health inspections and monitoring drinking water quality, and research. The Non-Insured Health Benefits Program provides over 800,000 eligible First Nations and Inuit with a limited range of medically necessary health-related goods and services not provided through private insurance plans, provincial/territorial health or social programs or other publicly funded programs.

Program Activity: First Nations and Inuit Health Programming and Services

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
2,199.7	1,977.6	2,017.7

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
1867	1862	1861

The provision of health programs and services by Health Canada to First Nations and Inuit is rooted in the Federal Indian Health Policy. The Department provides health programs and services to First Nations and Inuit as a matter of policy, using annual *Appropriations Acts* to obtain Parliamentary approval. Together with First Nations and Inuit and other health partners, Health Canada, through its regional offices, delivers public health and community health programs on-reserve. These include environmental health and communicable and non-communicable disease prevention, and provision of primary health care services through nursing stations and community health centres in remote or isolated communities to supplement and support the services that provincial, territorial and regional health authorities provide. The Department also supports targeted health promotion programs for Aboriginal people, regardless of residency as well as counselling, addictions and mental wellness services. The Non-Insured Health Benefits coverage of drug, dental care, vision care, medical supplies and equipment, short-term crisis intervention mental health services, and medical transportation is available to all eligible First Nations and Inuit in Canada, regardless of residency.

Benefit for Canadians: This program activity contributes to reducing gaps in health status between First Nations and Inuit and other Canadians.

Expected Results of Program Activity: Better health outcomes and reduction of health inequalities between First Nations and Inuit and other Canadians	
Performance Indicators: Life expectancy (at birth by gender, on and off reserve), comparison of First Nations and Inuit with other Canadians Birth weight (comparison of First Nations and Inuit with other Canadians) Infant mortality rates (comparison of First Nations with other Canadians) Rates of conditions by type—e.g., diabetes, suicide	***Targets:*** Interim targets for 2010/2011: • Food security pilot projects implemented in two First Nations and Inuit communities • 90% of First Nations communities with a tested pandemic preparedness and response plan • 200 sites have access to telehealth services • Accreditation of three Native Alcohol and Drug Abuse Treatment Centres • Certification of 100 additional addictions workers • 200 First Nations and Inuit youth suicide prevention projects implemented • 80 maternal child health projects implemented in 200 communities • 600 First Nations communities with diabetes prevention services

Canada's Economic Action Plan (CEAP)

Budget 2009 included $169.9 million for 2010-2011 to strengthen current health programs (Non-Insured Health Benefits (NIHB) and Primary Care services), improve health outcomes for First Nations and Inuit individuals, and move towards greater integration with provincial and territorial health systems. Funding is aimed at addressing the gap between the Department's base level of funding for NIHB and its projected expenditures, and ensuring basic primary care services in remote and isolated communities continue to be available.

Budget 2009 also provided $67.4 million in 2010-2011 for the construction and renovation of health services infrastructure for First Nations, including health facilities and nurses' residences. More than 40 new major construction projects and approximately 230 renovation projects are to be completed by March 31, 2011.

Planning Highlights

The vast majority of expenditures under this program activity will involve ongoing departmental programs and services for First Nations and Inuit health. However, the federal government has made significant commitments in recent Speeches from the Throne and Budgets to work with First Nations and Inuit, as well as other partners to address key health challenges and pursue innovative approaches to strengthen First Nations and Inuit access to health services and improve health outcomes. The Department has captured these commitments under the operational priority "Strengthen First Nations and Inuit Health Programming", described in Section I. In particular, the Department will move forward on five high-level focuses for action.

- Health Canada will pursue strategies designed to strengthen First Nations and Inuit health programming, such as, targeted health promotion and disease prevention.

- The Department will work with First Nations communities to address communicable disease outbreaks through supports at the community-level and coordinated approaches with provincial governments that will reduce disparities between First Nations and nearby communities.

- Investments from Budget 2008 have supported negotiations between the governments of Canada and British Columbia (BC) and BC First Nations towards the first tripartite agreement on governance of health services for First Nations. It is expected that progress will be made toward First Nations and BC health programs and services

that are more integrated and harmonized and toward an enhanced role for First Nations in the planning, management and delivery of health services. Health Canada also will pursue additional tripartite agreements for First Nations in other provinces.

- In collaboration with First Nation communities, the Department will ensure its planning, prevention, mitigation and response strategies are effective to act promptly when health situations emerge that call for time-sensitive response to a pandemic threat.

- As noted above as a CEAP initiative, Health Canada will use additional funds provided through Budget 2009 to continue to support the provision of primary care services to First Nations communities and non-insured health benefits coverage to First Nations and Inuit, and complete at least 40 new major construction health facilities infrastructure projects and approximately 230 renovation projects.

Program Activity: Internal Services

Financial Resources ($ millions)		
2010-11	2011-12	2012-13
327.6	309.1	301.2

Human Resources (Full-time Equivalents)		
2010-11	2011-12	2012-13
2652	2578	2570

Health Canada has a range of internal services. Some, in areas such as financial, administrative, real property, security, human resources, information management and information technology, provide the basic operational services that enable the Department to function while ensuring compliance to new and existing central agency policies. Other internal services in Health Canada address departmental and Health Portfolio needs such as general communications and policy activities, as well as managing relations with Parliamentarians, the Cabinet system and other government departments and levels of government. An additional set of internal service roles centre on critical departmental and government-wide responsibilities, such as ensuring the best value for Canadians through planning, accountability and tracking performance and results.

Those responsible for internal services within Health Canada will continue to focus on their ongoing responsibilities while continuing to build on the use of department-wide enterprise approaches in such areas as learning, information technology and information management. Many will directly help to oversee, deliver or support one or more of the three management priorities that are set out below. In addition to those efforts, the Department will address specific issues and opportunities that arise. For example, Health Canada will continue to develop business continuity plans related to issues, such as impacts of an influenza pandemic on Health Canada employees and workplaces, to ensure critical services are delivered to Canadians.

Canada's Economic Action Plan (CEAP)

Budget 2009 included $7.1 million for 2010-2011 to address the deferred maintenance at Health Canada's laboratory facilities. This initiative will address building code, safety, barrier-free accessibility issues, and compliance with regulations as well as addressing deferred maintenance and recapitalization of assets. Investing in Health Canada laboratories will ensure that laboratory facilities and operations can be aligned efficiently with business priorities.

Planning Highlights

Initiatives to enhance corporate culture to increase accountability and effectiveness will continue. The strategic policy renewal initiative, for example, will continue with the collaborative practices initiated in the previous year to identify medium and longer term priorities. These include the use of modern technology to leverage the tremendous knowledge and expertise resident in the Department at all levels. Health Canada will focus on other such initiatives as it continues its internal improvements to ensure that it is well positioned to deliver the programs and services that Canadians want and expect from it.

To leverage the benefits of Canada's Economic Action Plan investments and support progress on the Government of Canada's Science and Technology Strategy, Health Canada will put a Science Plan in place. The Plan will set out departmental science priorities over the next three to five years, improve the management and planning of science, enhance its access and capacity required to deliver on the Department's mandate. It will include a coherent and workable plan under the Laboratory Infrastructure Renewal, related to the evaluation of the mission critical needs to science activities in the Department and improved access to external science. The Science Plan will also guide the

development of policy frameworks and plans on science policy issues in health-related emerging technologies. These may include fields such as genomics, bioethics and nanotechnology that will support departmental responsibilities in the following areas: policy and regulation, science and skills, and internal and external awareness.

The Department will continue to act on its human resource priorities through the Talent Management Strategy and investments in people in line with government-wide Public Service Renewal commitments. This will include an updated alignment of human resource practices with current Health Canada business goals and talent needs. Strategies will seek to improve organizational performance through the active engagement, development and retention of employees. A focus on building talent will involve learning and development programs with particular emphasis on reaching the Department's staff in its policy, science and regulatory, health services/program delivery, and internal services communities.

Comprising over 30% of Health Canada's staff, the regional operations represent the face of the Department to the people of Canada. They are the program and service delivery arm for Health Canada, specifically in the areas of First Nations and Inuit health, occupational health and safety, inspection and surveillance, prevention and treatment of illicit drug use and abuse, and health and food products. Health Canada's regional operations will strengthen their role as a key strategic business partner in supporting the Department by delivering on its operational and management priorities.

In recent years, Health Canada has made considerable strides in its corporate planning, accountability and reporting processes. The Department will build on the progress and lessons learned to date in three areas. First, it will enhance the integration of planning, monitoring and reporting to improve information for decision-making. Planning and reporting results will be enhanced with improved performance measurement indicators as part of an updated Program Activity Architecture. Second, Health Canada will enhance its existing Financial Management Control Framework to ensure the effective allocation and monitoring of financial resources to achieve departmental objectives and priorities. Third, the Department expects increased effectiveness in its management of grants and contributions programs by moving toward a more risk-based approach for decision-making through the introduction of new tools that will ensure a stronger focus on higher risk areas.

Health Canada intends to increase departmental transparency and engagement with Canadians. One way will be to develop and implement effective, up-to-date departmental tools and processes for engaging Canadians. Another will be to bring about systematic, comprehensive departmental approaches for communicating with, engaging and collaborating with stakeholders and citizens in the development and review of departmental policies and programs, and ensuring public access to timely, relevant health and safety information. Together, these actions involve all of Health Canada's policy and program areas working together to help achieve Health Canada goals such as improved performance of the Department's regulatory functions, better program design and delivery and better response from Canadians to departmental communications about health-related issues.

Section III – Supplementary Information

Financial information

The future-oriented financial highlights presented within this RPP are intended to serve as a general overview of HC's financial position and operations. These future-oriented financial highlights are prepared on an accrual basis to strengthen accountability and improve transparency and financial management.

Future-oriented financial statements can be found on HC's website.

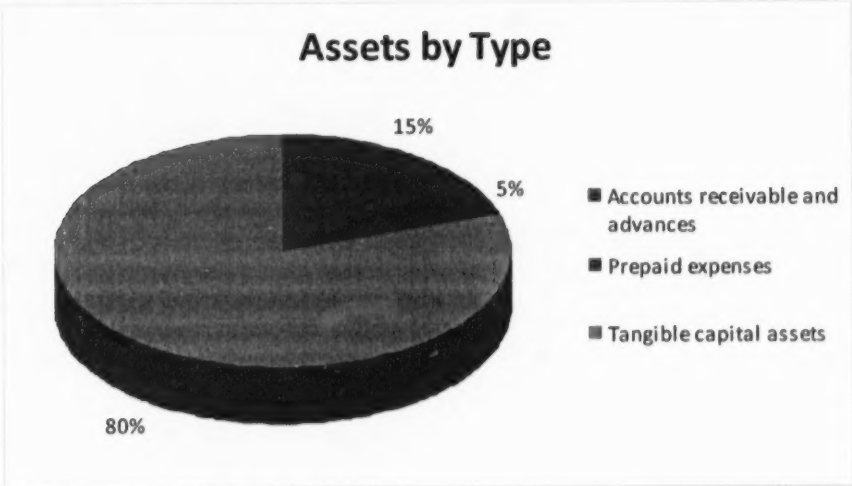
Future-oriented
Condensed Statement of Financial Position
($ thousands)

Condensed Statement of Financial Position At End of Year	**% Change**	**Future Oriented 2010-11**	**Future Oriented 2009-10**
ASSETS			
Total Assets	8%	222,534	206,345
TOTAL	8%	$222,534	$206,345
LIABILITIES			
Total Liabilities	-2%	870,455	887,538
EQUITY			
Total Equity	-5%	(647,921)	(681,193)
TOTAL LIABILITIES and EQUITY of CANADA	8%	$222,534	$206,345

Future-oriented
Condensed Statement of Operations
($ thousands)

Condensed Statement of Operations At End of Year	**% Change**	**Future Oriented 2010-11**	**Future Oriented 2009-10**
EXPENSES			
Total Expenses	-8%	3,495,378	3,806,807
REVENUES			
Total Revenues		(81,355)	(81,159)
NET COST OF OPERATIONS	-8%	$3,414,023	$3,725,648

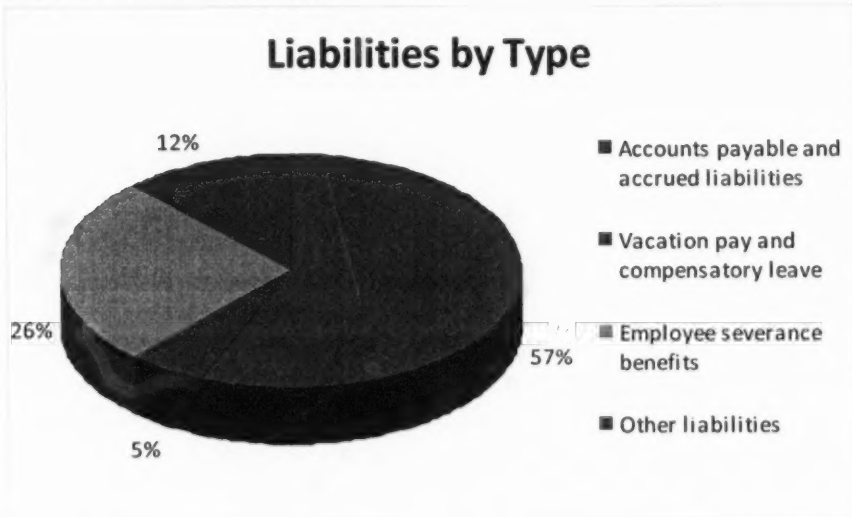
Future-oriented Assets by Type



Assets by Type

Total assets are anticipated to be $222.5M for 2010-11, an increase of $16.2M over 2009-10 projections. Accounts receivable is expected to be $33.6M. Trend analysis indicates that the net change in Health Canada's accounts receivable will be an increase of $3.5M. Capital assets are projected to be $177.7M, an increase of $12.7M over 2009-10 projections. Prepaid expenses are $11.2M a figure unchanged from 2009-10.

Future-oriented Liabilities by Type

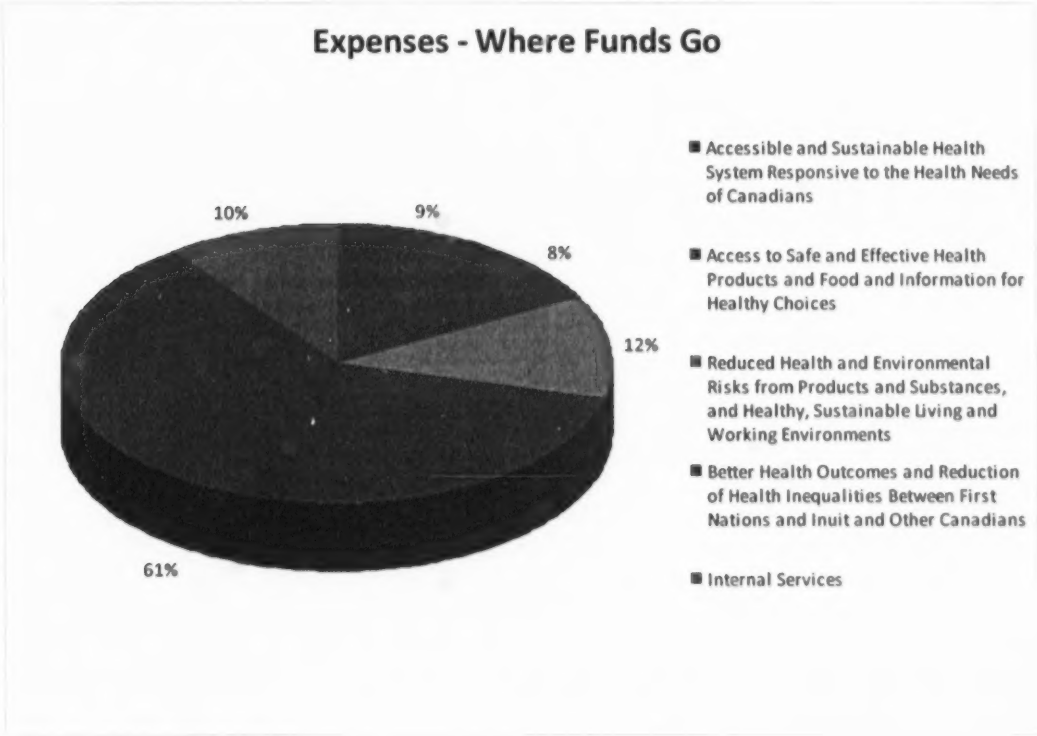


Total Liabilities

Total liabilities are anticipated to be $870.4M for 2010-11, a net decrease of $17.1M over 2009-10 projections. The breakdown of liabilities is as follows: accounts payable and accrued liabilities $490.7M; vacation pay and

compensatory leave $46.3M; deferred revenue $2.3M; employee severance benefits $226.3M and other liabilities $104.8M.

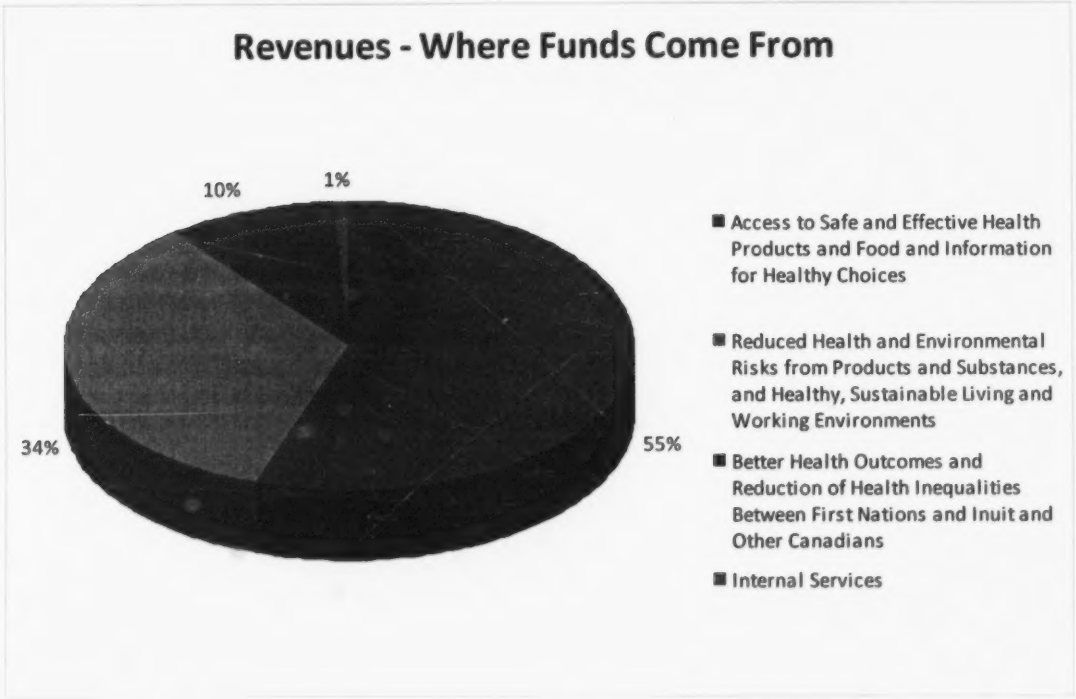
Future-oriented Expenses by Strategic Outcomes


Expenses - Where Funds Go
10%
9%
8%
12%
61%
Accessible and Sustainable Health System Responsive to the Health Needs of Canadians
Access to Safe and Effective Health Products and Food and Information for Healthy Choices
Reduced Health and Environmental Risks from Products and Substances, and Healthy, Sustainable Living and Working Environments
Better Health Outcomes and Reduction of Health Inequalities Between First Nations and Inuit and Other Canadians
Internal Services

Total Expenses

Health Canada is projecting $3,495.4M in expenses based on 2010-11 Main Estimates and accrued information. This amount does not include supplementary estimates. The expenses are broken down as follows: Transfer payments $1,276.8M; Salaries and wages $924.3M; Professional and special services $413.6M; Utilities, materials and supplies $508.9M; Travel-non-insured health patient $181.3M; Accommodation $62.4M; Travel and relocation $35M; Purchased repair and maintenance $25.3M; Communication $17.7M; Amortization $22.3M; Information $19.3M; Other $5.5M and Rentals $3M.

Future-oriented Revenues by Strategic Outcomes


Revenues - Where Funds Come From
10%
1%
34%
55%
Access to Safe and Effective Health Products and Food and Information for Healthy Choices
Reduced Health and Environmental Risks from Products and Substances, and Healthy, Sustainable Living and Working Environments
Better Health Outcomes and Reduction of Health Inequalities Between First Nations and Inuit and Other Canadians
Internal Services

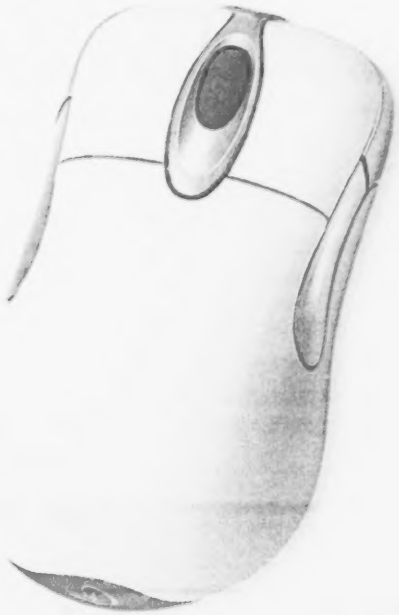
Total Revenues

Health Canada receives most of its funding through annual Parliamentary appropriations. Health Canada's revenue is generated by program activities that support the above-noted Strategic Outcomes. Health Canada projects total revenues in 2010-11 will be $81.4M. These revenues will come from the following: Services of a regulatory nature $29M; Rights and privileges $18.9M; Services on a non-regulatory nature $30.2M; Lease and use of public property $.3M; Interest $.8M and Other $2.2M.

List of Tables

The following tables can be found on the Treasury Board Secretariat website:
http://www.tbs-sct.ghttp//www.tbs-sct.gc.ca/rpp/2009-2010/index-eng.asp

Details on Transfer Payment Programs
Up-Front Multi-Year Funding
Green Procurement
Horizontal Initiatives
Internal Audits and Evaluations
Sources of Respendable and Non-Respendable Revenue
Status Report on Major Crown Projects
Summary of Capital Spending by Program Activity
User Fees



Additional Weblinks

Aboriginal Diabetes Initiative
http://www.hc-sc.gc.ca/ahc-asc/activit/marketsoc/camp/adi-ida-eng.php
Act to Amend the Tobacco Act
http://www2.publicationsduquebec.gouv.qc.ca/dynamicSearch/telecharge.php?type=5&file=2005C29A.PDF
Air Quality
http://www.hc-sc.gc.ca/ewh-semt/air/index-eng.php
Assisted Human Reproduction
http://www.hc-sc.gc.ca/hl-vs/reprod/index-eng.php
Assisted Human Reproduction Act
http://laws.justice.gc.ca/en/A-13.4/
Biologics and radiopharmaceuticals
http://www.hc-sc.gc.ca/dhp-mps/brgtherap/index-eng.php
Canada Consumer Product Safety Act
http://healthycanadians.ca/media/2008-ccps-act-bk_e.html
Canada's Economic Action Plan
http://www.actionplan.gc.ca/eng/index.asp
Canada's Food Guide
http://www.hc-sc.gc.ca/fn-an/food-guide-aliment/index-eng.php
Canada Health Act
http://www.hc-sc.gc.ca/hcs-sss/medi-assur/cha-lcs/index-eng.php
Canada Health Infoway
http://www.infoway-inforoute.ca/
Canadian Community Health Survey
http://www.statcan.gc.ca/imdb-bmdi/instrument/3226_Q1_V5-eng.pdf
Canadian Environmental Protection Act
http://laws.justice.gc.ca/en/C-15.31/
Canadian Food Inspection Agency
http://www.inspection.gc.ca/english/toce.shtml
Canadian Food Inspection Agency Act
http://laws.justice.gc.ca/en/C-16.5/
Canadian Tobacco Use Monitoring Survey
http://www.statcan.gc.ca/dli-ild/data-donnees/ftp/survey-tobacco-enquete-tabac-eng.htm
Chemicals Management Plan
http://www.chemicalsubstanceschimiques.gc.ca/plan/index_e.html
Climate Change Adaptation Framework
http://www.coag.gov.au/coag_meeting_outcomes/2007-04-13/docs/national_climate_change_adaption_framework.pdf
Compliance and Enforcement
http://www.hc-sc.gc.ca/cps-spc/pest/index-eng.php
Controlled Drugs and Substances Act
http://laws.justice.gc.ca/en/C-38.8/
Cosmetics
http://www.hc-sc.gc.ca/cps-spc/person/cosmet/index-eng.php
Department of Health Act
http://laws.justice.gc.ca/en/H-3.2/index.html
Dosimetry Services
http://www.hc-sc.gc.ca/ewh-semt/occup-travail/radiation/dosim/index-eng.php
Drug Analysis Service
http://www.hc-sc.gc.ca/hc-ps/substancontrol/analys-drugs-drogues/index-eng.php

Drug Safety and Effectiveness Network
http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/_2008/2008_110-eng.php
Drug Treatment Funding Program
http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/_2008/2008_64bk-eng.php
Emergency Preparedness
http://www.hc-sc.gc.ca/hc-ps/ed-ud/prepar/index-eng.php
Environmental radiation protection
http://www.hc-sc.gc.ca/ewh-semt/radiation/index-eng.php
Evaluation of new products
http://www.hc-sc.gc.ca/cps-spc/pest/index-eng.php
Federal Indian Health Policy
http://www.hc-sc.gc.ca/ahc-asc/branch-dirgen/fnihb-dgspni/poli_1979-eng.php
Federal Tobacco Control Strategy
http://www.hc-sc.gc.ca/hc-ps/tobac-tabac/about-apropos/role/federal/strateg-eng.php
Food and Consumer Safety Action Plan
http://www.healthycanadians.gc.ca/pr-rp/plan_e.html
Food and Drugs Act
http://laws.justice.gc.ca/en/F-27
Food borne chemical contaminants
http://www.hc-sc.gc.ca/fn-an/securit/chem-chim/index-eng.php
Food borne pathogens
http://www.hc-sc.gc.ca/fn-an/securit/ill-intox/index-eng.php
Good Manufacturing Practices
http://www.hc-sc.gc.ca/dhp-mps/compli-conform/gmp-bpf/index-eng.php
Growing Forward
http://www4.agr.gc.ca/AAFC-AAC/display-afficher.do?id=1200339470715&lang=eng
Guidelines for Incidental Additive Submissions
http://www.hc-sc.gc.ca/fn-an/legislation/guide-ld/guide_incidental_addit_indirects-eng.php
Hazardous Products Act
http://laws.justice.gc.ca/en/H-3/
Health Human Resources Strategy
http://www.hc-sc.gc.ca/hcs-sss/hhr-rhs/strateg/index-eng.php
Marihuana Medical Access Regulations
http://www.hc-sc.gc.ca/dhp-mps/marihuana/index-eng.php
Medical Devices
http://www.hc-sc.gc.ca/dhp-mps/md-im/index-eng.php
National Anti-Drug Strategy
http://www.nationalantidrugstrategy.gc.ca/
Natural Health Products
http://www.hc-sc.gc.ca/dhp-mps/prodnatur/index-eng.php
Non-Insured Health Benefits
http://www.hc-sc.gc.ca/fniah-spnia/nihb-ssna/index-eng.php
Novel Foods
http://www.hc-sc.gc.ca/fn-an/gmf-agm/index-eng.php
Nutrition
http://www.hc-sc.gc.ca/fn-an/index-eng.php
Official language minority communities
http://www.hc-sc.gc.ca/ahc-asc/branch-dirgen/rapb-dgrp/pd-dp/olcdb-baclo-eng.php
Pest Control Products Act
http://laws.justice.gc.ca/en/P-9/index.html

Pest Management Regulatory Agency
http://www.hc-sc.gc.ca/ahc-asc/branch-dirgen/pmra-arla/index-eng.php
Pesticide Risk Reduction
http://www.hc-sc.gc.ca/cps-spc/pest/index-eng.php
Pharmaceutical Human Drugs
http://www.hc-sc.gc.ca/dhp-mps/prodpharma/index-eng.php
Program Activity Architecture
http://www.tbs-sct.gc.ca/tbs-sct/abu-ans/tbs-sct/paa-aap-eng.asp
Public Health Agency of Canada
http://www.phac-aspc.gc.ca/index-eng.php
Public Service Renewal
http://www.tbs-sct.gc.ca/chro-dprh/ren-eng.asp
Quarantine Act
http://laws.justice.gc.ca/en/Q-1/
Radiation Emitting Devices Act
http://laws.justice.gc.ca/en/R-1/index.html
Re-evaluation of older products
http://www.hc-sc.gc.ca/cps-spc/pest/index-eng.php
Science and Technology Strategy
http://www.ic.gc.ca/eic/site/ic1.nsf/eng/h_00231.html
Talent Management Strategy
http://intranet.hc-sc.gc.ca/ai/psr-rfp/tms-sgt/tms-sgt-chart-eng.php
Tobacco Act
http://laws.justice.gc.ca/en/T-11.5/
Veterinary Drugs
http://www.hc-sc.gc.ca/dhp-mps/vet/index-eng.php
Water Quality
http://www.hc-sc.gc.ca/ewh-semt/water-eau/index-eng.php
Women's Health
http://www.hc-sc.gc.ca/ahc-asc/branch-dirgen/rapb-dgrp/pd-dp/index-eng.php#f